PTO/SB/05 (11-00)
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Reduction Act of 1995, no persons are required to respond

## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.		346392000900				
First Inve	entor	Guy Michael MILLER				
Title	COMPOSITIO OF CEREBRA	NS AND METHODS FOR THE PREVENTION AND TREATMENT AL ISCHEMIA				
_						

(Anty for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. EL779890424US

CERTIFICATE	OF	MAILING	BY	"EXPRESS	MAIL"

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Date of Deposit: December 14, 2001

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	under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.												
		Tamara Alcaraz								50,			
				ramara	Alcaraz .					<b>∞</b> ₹			
	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					Assistant Commissioner for Patents  ADDRESS TO: Box Patent Application Washington, DC 20231							
	1. <b>x</b> 2. <b>x</b> 3. <b>x</b>	(Submit an original, and Applicant claims s See 37 CFR 1.27.	[Total		7 8. a.	CD-ROM or CD- Program (Appen- Nucleotide and/o (if applicable, all neces	<i>dix)</i> or Amino Acid S	equence S	·	J10			
1   1   1   1   1   1   1   1   1   1	Descriptive title of the Invention     Cross Reference to Related Applications     Statement Regarding Fed sponsored R & D     Reference to sequence listing, a table, or a computer program listing appendix     Background of the Invention					b. Specification Sequence Listing on:         i. □ CD-ROM or CD-R (2 copies); or         ii. □ paper         c. □ Statements verifying identify of above copies							
Hudh. Burn		<ul> <li>Brief Summary of the</li> <li>Brief Description of the</li> </ul>				ACCOMPA	NYING APPLIC	CATION PA	RTS				
# ==		<ul> <li>Detailed Description</li> <li>Claim(s)</li> <li>Abstract of the Disclosing</li> </ul>			9. 🔲	Assignment Papers 37 CFR 3.73(b) Sta	atement	ocument(s))	Power of At	tornev			
ا ا	4. 🔀	Drawing(s) (35 US	SC 113) [Total	Sheets 4 ]	11.	(where there is an ass English Translation	-	licable)		,			
j,	5.	Oath or Declaratio	on [Total	Pages ]	12.	Information Disclos (IDS)/PTO-1449	ure Statement		Copies of ID Citations	os			
÷		a. Newly	y executed (original or cop	y)	13.	13. Preliminary Amendment							
	b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/th/isional with Box 18 completed)					14. Return Receipt Postcard (MPEP 503) Should be specifically Itemized)							
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)						(if foreign priority is daimed)							
16. Request and Certification under 35 U.S.C. 122(b must attach form PTO/SB/35 or its equivalent.								(2)(B)(i). Applic	ant				
L	6. 🗶	Application Data S	Sheet. See 37 CFR 1.3	76 - 4 pages	17. 🗶	Other Ret	um receipt postca	ard		,			
	undei	r 37 CFR 1.76:	JCATION, check approp	riate box and supply the re	•	·	eliminary amendm	ent, or in an i	Application Data	Sheet			
ı			Divisional	Continuation-in-part (CIP)	•	or application No:							
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ŀ	Name Gladys H. Monroy												
ļ	Addres	•	Montson & Foerster LLP										
Address 755 Page Mill Road  City Palo Alto State California						Zip Coo	te 94304-10	018					
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		(Print/Type)	Debra J. Gla		4	on No. (Attomey/Agent		33,888 for 32.430					

Sianature



## **FEE TRANSMITTAL FOR FY 2001**

Complete if Known					
To Be Assigned					
Herewith					
Guy Michael MILLER					
To Be Assigned					
To Be Assigned					

Patent fees are subject to annual revision.

Attorney Docket No. 346392000900 (\$)688.00 **TOTAL AMOUNT OF PAYMENT** 

	<u> </u>								
METHOD OF PAYMENT	FEE CALCULATION (continued)								
1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDI	ITIONAL F	EES		. –				
Deposit Account Number Deposit	Large Fee Code	Entity Fee (\$)	Smail Fee Code	Entity Fee (\$)	Fee C	escription		Fee Paid	
Account Name Morrison & Foerster LLP	105	130	205	65	Surcha	arge - late filing fee	or oath		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127	50	227	25	Surcha	arge - late provisio			
Applicant claims small entity status. See 37 CFR 1.27	139	130	139	130		cover sheet nglish specification	1		
Applicant claims small entity status. See 37 CFR 1.27  2. Payment Enclosed:	147	2,520	147	2,520		ng a request for ex nination	ng a request for ex parte ination		
☐ Check ☐ Credit Card ☐ Money Order ☐ Other	112	920°	112	920°	Reque	sting publication o	f SIR prior		
FEE CALCULATION  1. BASIC FILING FEE	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115	110	215	55		ion for reply within	first month		
	116	390	216	195		ion for reply within			
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee	117	890	217	445	Extens month	ion for reply within	third		
nata nata	118	1,390	218	695	Extens month	ion for reply within	fourth		
101 710 201 355 Utility filing fee <b>355</b>	128	1,890	228	945		ion for reply within	fifth month		
106 320 206 160 Design filing fee	119	310	219	155		of Appeal			
107 490 207 245 Plant filing fee	120	310	220	155	•	a brief in support o	f an appeal		
108 710 208 355 Reissue filing fee	121	270	221	135	•	st for oral hearing			
101 710 201 355 Utility filing fee 355 106 320 206 160 Design filing fee 107 490 207 245 Plant filing fee 108 710 208 355 Reissue filing fee 114 150 214 75 Provisional filing fee  SUBTOTAL (1) (\$)355.00	138	1,510	138	1,510	procee	-			
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SUBTOTAL (1) (\$)355.00	141	1,240	241	620	Peddo	n to revive - uninte	nuonai		
2. EXTRA CLAIM FEES  Extra Fee from	142	1,240	242	620		ssue fee (or reissu	ie)		
Claims below Fee Paid	143	440	243	220	•	issue fee	<u> </u>		
Total Claims 57 - 20** = 37 x 9 = \$333	144	600	244	300	Plant is	ssue fee	<b></b>		
Independent 1 -3** = 0 x 42 = \$0	122	130	122	130		ns of the Commiss			
Multiple Dependent 140 = \$N/A	123	50	123	50	applica				
	126	180	126	180	Disclos	ssion of Information sure Strnt			
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103 18 203 9 Claims in excess of 20	146	710	246	355	rejection (37 CF	R § 1.129(a))			
102 84 202 42 Independent claims in excess of 3	149	710	249	355	examin	ch additional invented (37 CFR § 1.12	29(b))		
104 280 204 140 Multiple dependent claims, if not paid	179	710	279	355	(RCE)	st for Continued Ex			
109 80 209 40 "Reissue independent claims over original patent	169	900	169	900		st for expedited ex sign application	amination		
110 18 210 9 "Reissue claims in excess of 20 and over original patent	Other fee	(enorita							
SUBTOTAL (2) (\$)333.00	Outer tee	(apealy)				·		L	
** or number previously paid, if greater; For relssues, see above.	*Reduced	by Basic Fi	ling Fee F	Paid		SUBTOTAL (	(\$)	0.00	
SUBMITTED BY						Complete (if app	licable)		
Name (Print/Type) Debra J./Glaister /		stration No ney/Agent		33,888		Telephone	(650) 813	-5725	
for Gladys/H. Mignroy//	(Allor	ney/Agent	'	for 32,430		ĺ	for (650)	813-5711	
Signature Sun L' X Num				,			Decembe		

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